2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000000598

Entity Name: BOSTON MEDICAL CENTER CORPORATION

FILED
Jun 13, 2019
Secretary of State
9400877397CC

Current Principal Place of Business:

ONE BOSTON MEDICAL CENTER PLACE

BOSTON, MA 02118

Current Mailing Address:

ONE BOSTON MEDICAL CENTER PLACE BOSTON, MA 02118 US

FEI Number: 04-3314093 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title SC

Name WALSH, KATE Name BECK, DAVID

Address 5 UNION PARK STREET Address 50 MT VERNON ST

City-State-Zip: BOSTON MA 02118 City-State-Zip: BOSTON MA 02108

Title T Title DC

NameORLANDO, CHARLESNameSAMUELSON, MARTHAAddress18 PARK GROVE LANEAddress17 WINTHROP STREETCity-State-Zip:SHREWSBURY MA 01545City-State-Zip:NEWTON MA 02465

Title D Title D

Name AMENT, DAVID Name ANTMAN, KAREN M.D.

Address 37 CIRCUIT RD Address 14 BRIAR LANE

City-State-Zip: CHESTNUT HILL MA 02467 City-State-Zip: WESTON MA 02193

Title D Title D

Name BEKENSTEIN, ANITA Name BOCK, BARRY

Address 52 HIGH ROCK RD Address 10 KITTREDGE STREET

City-State-Zip: WAYLAND MA 01778 City-State-Zip: ROSLINDALE MA 02131

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID BECK CLERK 06/13/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name COLEMAN, DAVID M.D.
Address 130 APPLETON STREET
City-State-Zip: BOSTON MA 02116

Title D

Name CREMIEUX, PIERRE Address 59 WINDSOR RD

City-State-Zip: BROOKLINE MA 02445

Title D

Name EGERMAN, PAUL
Address 77 WESTCLIFF RD
City-State-Zip: WESTON MA 02493

Title D

Name FITCH, RUTH ELLEN
Address 98 LANCASTER TERRACE
City-State-Zip: BROOKLINE MA 02446

Title I

Name HALPIN, WILLIAM
Address 51 THURSTON RD
City-State-Zip: MELROSE MA 02176

Title D

Name KANJI, AZRA

Address 223 W SPRINGFIELD ST City-State-Zip: BOSTON MA 02118

Title D

Name MARKS, RICHARD Address 198 BABCOCK ST

City-State-Zip: BROOKLINE MA 02446

Title D

Name PERLMAN, CLAIRE

Address 180 SHADY COVE RD

City-State-Zip: N. KINGSTOWN RI 02852

Title D

Name TSENG, JENNIFER M.D.
Address 131 BISHOPS GATE ROAD

City-State-Zip: NEWTON MA 02459

Title D

Name YOUNISS, ANDREW
Address 5 CHARLES RIVER CT
City-State-Zip: WELLESLEY MA 02482

Title DIRECTOR

Name GRAYKEN, EILEEN

Title D

Name COTTERELL, SANDRA
Address 810 PARKER STREET
City-State-Zip: ROXBURY MA 02120

Title D

Name CUTLER, RANDI

Address FOUR SEASONS PLACE

220 BOYLSTON ST #1418

City-State-Zip: BOSTON MA 02116

Title D

Name MAYO, JEROD Address 1 COACH ROAD

City-State-Zip: NORTH ATTLEBORO MA 02760

Title D

Name FOLEY, MELANIE

Address 4 PADDOCK COURT

City-State-Zip: WALPOLE MA 02081

Title D

Name KAMES, KAREN
Address 3 WINTHROP ST
City-State-Zip: NEWTON MA 02465

Title D

Name LOPES, MANNY
Address 26 COPPERMINE RD
City-State-Zip: TOPSFIELD MA 01983

Title D

Name PATRICK, TRISHA
Address 9 WOODMAN RD
City-State-Zip: NEWTON MA 02467

Title D

Name PHALEN, JAMES S
Address 64 SEABURY POINT RD
City-State-Zip: DUXBURY MA 02332

Title D

Name LUPI, MONICA VALDES

Address C/O ANDY EPSTEIN
26 TOXTETH ST

City-State-Zip: BROOKLINE MA 02445

Title DIRECTOR

Name COLBERT, ENRIQUE
Address 30 CHESIRE STREET

City-State-Zip: JAMAICA PLAIN MA 02130

Title DIRECTOR

Name WALKER, ELIZABETH A

Address 90 WHITEHEAD ROAD
City-State-Zip: COHASSET MA 02025

Title DIRECTOR

NameROWE, SUSANNAAddress53 PARTRIDGE LANECity-State-Zip:BELMONT MA 02478

Address 60 BURROUGHS STREET

#34

City-State-Zip: JAMAICA PLAIN MA 02130